• <

By-Oberteuffer, Delbert

Health Education as a Foundation for Healthful Living.

Pub Date 21 Mar 69

Note-14p: Address presented at the National Conference of Rural Health (22nd, Philadelphia, Pennsylvania, March 21, 1969).

EDRS Price MF-\$0.25 HC-\$0.80

Descriptors-Curriculum. *Curriculum Development, Dropout Prevention, Dropout Problems, Educational Problems, *Health Education, *Individual Needs, Nutrition Instruction, School Health Services, *School Responsibility, Sex Education, *Social Responsibility

The time has come for education to be concerned first about the state of being of each individual: that is, the physical and mental health of each child so that he can become a more receptive learner. The intellectual processes which education has dealt with for so long is dependent upon the physical processes for their functional adequacy and efficiency. Several areas of health education can be readily adapted to the school situation. Certain health areas are more critical and vital to the well being of society than traditional academic subjects. Effective health education may be a partial solution to some of the problems education faces such as the drouput and developing a student's self-image. (DB)



U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE OFFICE OF EDUCATION

COUNCIL ON RURAL HEALTH AMERICAN MEDICAL ASSOCIATION 535 NORTH DEARBORN STREET CHICAGO, ILLINOIS 60610 THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF YIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL OFFICE OF EDUCATION POSITION OR POLICY.

"HEALTH EDUCATION AS A FOUNDATION FOR HEALTHFUL LIVING"*

Delbert Oberteuffer, Ph.D.

One of the greatest opportunities to improve life in these United States lies in the development of full-blown programs of health education in every school district. And a full-blown program of public health in every community. Those opportunities rank in importance right along with the opportunity the schools have to devise a new format for our whole educational program which will reach instead of repelling the 40% of young people who now drop out before finishing twelve years of school. I think you will agree that life would be vastly improved if we could help the oncoming generations protect themselves and their children against communicable diseases, eliminate malnutrition and hunger, save a billion dollars or so a year now spent on quackery, sort out and guide their own psychological growth, improve our record of "takes" in marriage, clean up our now polluted air and rivers, and to accomplish a few other equally important developmental tasks.

Regardless of the pride we take in our standard of living we still have a long way to go before we attain perfection in the quality of living. We're good -- but we're not good enough. We haven't taught

^{*}Presented at the 22nd National Conference on Rural Health sponsored by the AMA Council on Rural Health, Philadelphia, Pennsylvania, March 21, 1969.

enough people to make the most out of what they have to live with. There are too many impoverished lives, lives impaired by hunger or disease, or lives marked early for failure or disaster. Too many men suffer heart attacks because they weren't able to control the factors which, insofar as we know now, are conducive to such a disaster. There are far too many women whose lives are cut short who now have unsuspected cancer developing. Many of them could be saved that misery if someone in school had sense enough to develop a bit of information in this area. There are far too many young people floundering around in the morass of ignorance about their sexual urges and controls because some school faculty or school board hasn't got nerve enough to develop some decent and scientific instruction in this most compelling area. And if we were to grasp the opportunity to improve life by providing the motivation and the facilities to help the young remain active for a lifetime and not succumb to the sedentary world it would be most rewarding.

But let's pause here a moment for subject identification! We are supposed to be talking about health education as a foundation for healthful living. What is health education? Simple - and not expensive! It involves the mobilization of all scientific information which bears upon human life and would, when used, help to develop and improve the quality of living. School health education involves the presentation of an organized and appropriately graded segment of the curriculum from kindergarten through the twelfth grade - and into college, if the youngster gets that far.



Public health education means doing the same thing on a community level using all means and media possible to bring the message of cancer or tuberculosis or the venereal diseases and everything and anything else that bears upon the health of people.

Furthermore, it involves taking steps in school, in the home, and in the community to assure the youngster can be educated. (There's no use spending money trying to educate a child if impairments are blocking the way.) That means using physicians, nurses, dentists, dental hygienists and other professional people to create a school environment conducive to learning and to detect and get corrected those conditions in a child's life which stand in his way. No use trying to get along without medical advice and appropriate preventive or remedial action if the child can't hear, or has dyslexia, or epilepsy or is hungry!

That's about what health education is. It's so simple in concept, so useful and practical in application, and so fundamental to human achievement that one would think health education would be fully developed in every community.

But it isn't. We take better care of hogs and cattle and probably dogs and cats than we do the general run of school children. We should spend money by the millions in some sections of the U.S. on children who are so hungry they can't read, or so full of hate, or envy or hurt they can't think straight. In community after community in this country we haven't scratched the surface in health education - we think it is something not quite as sound educationally as algebra - so



we ignore it hoping it will go away. And we think its companion physical education is nothing but exercise - and - who needs that in school?

I'm not being pessimistic or defensive - I'm merely appraising in 1969 a need for the alteration of public and professional attitudes towards children in general and towards programs designed to help them out.

Therefore, it will be the purpose of this opening presentation of the Conference to stimulate you to have a look around when you get home, appraise the situation as you find it, and then, if you care to, raise a little hell by way of encouraging the school people to improve their program.

You see, as Terry Borton says in a recent story in the SATURDAY $\frac{1}{}$ REVIEW :

"There are two sections to almost every school's statement of educational objectives—one for real, and one for show. The first, the real one, talks about academic excellence, subject mastery, and getting into college or a job. The other discusses the human purpose of school—values, feelings, personal growth, the full and happy life. It is included because everyone knows that is is important, and that it ought to be central to the life of every school. But is is only for show. Everyone knows how little schools have done about it." 1

Unfortunately a school program of health education falls within this latter category. It sounds fine, ought to be done and all that, but despite the efforts of many hundreds of professional workers, health educators, physicians, nurses - and despite the pronouncements



^{1/ &}quot;Reach, Touch, and Teach" by Terry Borton, SATURDAY REVIEW, January 18, 1969, P. 56)

of educational and medical organizations, the development of school health education lags far behind public health education and, as the man says, schools is where the action is!

Meaning? Well, meaning that if you want a population enlightened about rural health services, or the need of health manpower in a rural community, or if you want something done in the area of dental health, or drug abuse, or nursing services, the place to open up these problems and needs is in the school program of health education. There the problems can be discussed, or the program of action developed (as in dental health or nursing service or disease control). The school presents a captive audience of willing learners responsive to discussion and action relevant to felt or demonstrable needs. If you want a rural population educated about tuberculosis of either the human or bovine variety the place to get at it <u>first</u> is in the schoolroom or laboratory through instructional units, Mantoux tests, or whatever device or procedure is currently available to control that disease.

But, more specifically, who am I talking about? Well, I've already mentioned the 40% of the youngsters who drop out somewhere between kindergarten and graduation from high school. Why did they? I think I know why the majority of them did. They dropped out because the school curriculum and school procedures meant nothing to them, weren't built for them (they were built in the classical tradition to prepare kids for culture and college). But five or six million of them drop out because of unresolved and disturbing health problems of one sort or another.



We're talking about the 500,000 youngsters with psycho-motor disturbances of one kind or another, or the ten million undernourished children, or the 300,000 who will be in our courts this year on delinquency charges growing out of psychological or emotional states that might be resolved if we had decent public or school counseling or clinics. I'm talking about the millions of alienated adolescents who are being brought up in a middle class society unable to break through and participate in a self-directed adult world and therefore revolt against those middle class standards of repression. I'm talking about those seven million children whose life expectancy is shortened by disease, hunger and despair - and about the adolescents who will become the drug users and alcoholics - four million of them.

I'm talking about the 4% of all youngsters who will be born in 1969 who will have birth defects of one kind or another who will need help to compensate for those handicaps, to help them live with what they have. And then I'm talking about the tens of millions of others who will grow up ignorant of good health practice because all they know is what they hear or see on the commercials. And I'm talking also of the millions of others with cardio-vascular disease, neurological deficit, pulmonary dysfunction, orthopedic problems, or hearing and vision distortions. These people need help - here - now - in either the school, or public domain.

How, if we were to press this on a step or two farther it would be useful to illuminate some fundamental truths upon which any such possibility of improvement is based.



First of all, it ought to be well-known that the quality of learning depends upon the quality of tissue doing the learning. You can't teach a malnourished child as well as if he had not been malnourished. The cells of the human organism are in one sense all the same - their function depends upon their quality. Starve them, poison them, infect them, and their function will be impaired. These children who are starving in Biafra are suffering permanent damage to brain cells, among others. And the same thing is true whether it be Biafra or Arizona, or Detroit or your home town. If there is a nutritional deficiency there will be a learning deficiency.

Conversely the better the tissue the more favorable are the circumstances under which learning takes place.

The meaning is clear - if we want the most from the dollar spent on education, if we want our young to be educated as best they can be, the answer is not first of all in facilities, buildings, libraries, or even in good teachers - but it is in the quality of the human being that is to be educated. That means any given youngster has to be given the best break possible, the best prenatal care, the best nutritional care, the best pediatric attention, protection against every disease we can get, aid, counsel, and love with solution of his problems, then if he is put in a school environment that will not destroy him he'll have a chance to learn.

A second fundamental grows out of the first. We simply must disabuse ourselves of the notion that the school exists solely for purposes of training the mind. It doesn't - because there is no such



thing as a mind to be trained all by itself, sitting on a desk top. There is a child - a child who comes to school all in one piece - brain, thyroid, ovaries, retina, feet, stomach, spleen, fears, anxieties, and sensitivities. There is no process in the world whereby the teacher can say "Now thyroid, you remain quiet while I teach this brain that $\frac{a+b-Cz}{y}$ = the square root of Z. The thyroid may, because of reasons unknown to the teacher say "The hell with it" and motivate the owner thereof to join the drop-outs.

Mind and body and spirit are one - and those who believe in the atomistic view as did the clerics of the middle ages and as do many of our latter day scholars have done irrepairable harm to the development of children by retarding the growth of health education and physical education as significant developmental experiences. Adherents to this atomistic point of view, this training of the mind doctrine believe that a cardiac inferiority is merely a cardiac inferiority and has no bearing upon any aspect of personality development or intellectual attainment. To them a nurse is no counselor, merely a sterilizer of instruments, and a physician is merely an appendage to education who can reduce the dislocated thumb, diagnose the impetigo, or issue the appropriate warnings to parents about mumps.

The intellectual belies his intellectualism by displaying an ignorance of man's nature through his wish to perpetuate the mind-body dichotomy. There is no surer delusion than to believe that intellect can be developed in "tough" courses, and alone, while the "social" and "the physical" aspects of youth are deliberately left out of a reformed curriculum. Such a position defeats the very purpose of the



whole structure of this spurious intellectualism crashing down around us in a chaos of frustration, nervous breakdowns, and maladjustments. There is no surer fact in all of life than the dependency of the intellectual processes upon the physical for their functional adequacy or efficiency. The human being feeds on something vastly more complex than reactor fuel and, if you want him to survive, we had better provide this nourishment in both school and home.

It ought to be crystal clear to us all that the whole child comes to school, not just his brains; that his learning capacity is determined and influenced not just by teachers and materials but by protoplasm as well, and that if we want children to get the most out of school we had better see that they bring the most to school with them by way of receptive tissue.

The third of these fundamental concepts which I would put before you relates to development of the curriculum itself. From first grade through college what are people taught? This is curriculum. The best brains in the field of education have been directed towards the development of curriculum and great strides have been made towards the production of learning experiences which will meet the needs of children growing up in the society in which we all live. Generally speaking, and in spite of apparent weaknesses here and there, our educational program is as good as they come, and better than most.

But it has one glaring weakness. A weakness so apparent as to baffle any of us who try to understand the human being and his needs. The American school curriculum has been far more concerned with man's



things than with man himself! Our people can build the best bridges in the world. They learned how in school. We were first to harness nuclear energy. (They got the foundation for that in school.) We teach the concepts and skills of algebra and geometry, of animal science and horticulture, of iambic pentameter and economics, and politics and theatrical production. We spend unlimited amounts on band uniforms and a school without a library is not a school. Man's things come first. How to build a television set, how to grow good tomatoes, how to pasteurize milk - these are all highly useful skills. We spend far more time studying how to make money than we do studying the nature of the one who makes it.

But, you know, the skills of family living are important! And the skill of protecting one's self and one's family against disease are useful too. Perhaps the curriculum should find a place for the development of the skills of listening, or of leisure time, or of mate selection, or of pre-marital sex behavior, or of prenatal self-care of some of our young mothers. To develop the skills, knowledge, and understanding necessary for appropriate race relations is important. To develop skills of problem solving - especially when the problems are one's own - would be useful. To know one physician from another, good medicine from the phony, to know of the danger and fallacies of self-medication and back fence diagnosis would save heartache - and lives.

But to listen to <u>some</u> of our curriculum makers, not all, and especially those at the college level who influence elementary and



secondary schools and to hear some state and local administrators one wonders. One wonders at the depth of their knowledge of the human being for whose education they are responsible. I get the impression from some of them that they are almost masochistic in their view. They seem to be quite content to let the children fail - drop out for want of glasses, or vision screening, or regulations against polio or tuberculosis. Don't disturb the even flow of things. We've never had school nurses so why employ them now? Let these children who can't meet the present standards fail and drop out - we have no time in the curriculum for any instruction in anxiety, worry, problem solving, or development of self-image. Those things are too esoteric anyway - and please - no instruction about venereal disease or family planning. Oh God, no! Think what the Woman's Club would say - or the local trouble makers! No - we have to have algebra and plane and solid geometry and trig - teaches us how to measure the height of that imaginary tree!

The point is there <u>is</u> room in the American curriculum - if we would seriously reexamine and reconstruct it in terms of today's needs.

I said <u>today's</u> needs - and the need of a future America. Some things in the elementary and high school curriculum will go, some will be condensed, and some new things, valuable things, will be added.

Hopefully, we will study more of man, things that are relevant to his existence. We'll try to learn something of his passion for war, of the causes, psychological and physiological, of his riots, his poverty, his crime. We'll make a study of the causes of his alarming suicide,



divorce, and mental breakdown rates. His automobile accident rate may become as important as his economics of balance of payments and, who knows, maybe learning about the PAP test may be as important as learning about the G.W.P. That would be the day:

No - the evolution of the American curriculum is not yet complete. Somehow change will come about. The seeming impermeability of certain academic "disciplines" (whatever those are!) notably sociology, mathematics and economics in face of a mass of data from other areas of human need that has not been granted a place in their theoretical purview will have to be broken. The "liberal arts" will have to become truly liberal in their acceptance of unfamiliar subject matter.

School health education and public health education are dual programs dedicated entirely to the betterment of life in our country and, in fact, in the world. It is through these programs that the advances of the sciences towards the development of man and towards the prevention of his diseases is made known. School health education programs cannot do this highly educational task alone. In fact, it is very reasonable indeed to believe that most of what we have learned in life takes place not under school auspices but from our public experiences. One perhaps learns as much if not more about one's health from the public media as one does from school. For this reason we have developed an enormous super-structure of public organizations and agencies whose programs embrace solid efforts towards informing the public about the many health problems with which we are faced. These range through the official public health departments in our communities and states to the voluntarily supported unofficial health agencies most of which are national in scope but local in effort.



example, if we are faced, as many are predicting, with an epidemic of heart disease, especially among men, of such severity as we have not known before, then such public health educational and therapeutic measures as are needed to give care to those afflicted and to educate those who might be spared the attack are of great significance to our mode of living. If we are proud of the relatively low tuberculosis rate in our communities we should realize that the disease could make a comeback tomorrow if today we slacken our public efforts towards its control.

Is there no hunger in our country? Or syphilis? Or mental disorder? There is, indeed, and constant effort on the part of our public health officials is needed to control those afflictions. Can anyone in his right mind doubt that step one in the poverty program must be the provision of adequate nutrition for the some 20 million people now living at sub-standard nutritional levels? It is pure sophistry to believe that we have the healthiest population on earth. We don't. Our infant mortality rate is higher than it should be. Our venereal disease rate is a disgrace. Our water and air pollution problem has gotten out of hand. Our tobacco, drug, and alcohol consumption per unit of population is hardly trivial.

It is in the realm of public health education and public health services that broad frontal attacks on these and other problems must be made. To develop in every community and state public health departments and community health agencies in their efforts to do something helpful on these problems could well be the central expression of our citizenry and of the professional personnel concerned about these aspects of public life. Problems such as population control,



family planning, tuberculosis, cancer, heart disease, infantile paralysis, and many others can be made responsive to such efforts and the basis for such efforts is obviously the creation of a citizenry aware and informed about such matters. Where constructive scientifically based educational and legislative effort is developed at either the local, state, or federal level are deserving of our support.

As Peter Schrag of the SATURDAY REVIEW has said:

"No modern Western Nation devotes so small a proportion of its wealth to public assistance and health as we do. Do we have the world's best medical facilities? Probably we do, but we also rank above a dozen others in infant mortality. Where else in modern society can one find whole classes of school children who have never seen a dentist or who fall asleep at their desks because they had no breakfast?" 2/

And, from the same brilliant editorial staff I close with this paragraph from Norman Cousins:

There can be no more important education today than education for personal effectiveness and a sense of connection with big events. A truly educated person is one who has reasonable knowledge, if not command, of his environment, who performs those acts that are relevant to his well-being and the well-being of the people around him, who is able to think about and to anticipate the effects by helping to deal adequately with the causes. However impressive a man's acquisition of workly knowledge, however proficient his ability to marry theory to technique, if he cannot use his thinking ability and his skills to work for a safer and better world, his education is incomplete and he is in trouble."3/

Health education is not just a foundation for healthful living it's a foundation for personal effectiveness in any endeavor.

^{3/ &}quot;Education Against Helplessness" by Norman Cousins, SATURDAY REVIEW, March 19, 1960, P. 22. th-2/13/69



^{2/ &}quot;The Summer of Our Discontent" by Peter Schrag, SATURDAY REVIEW, August 10, 1968, P. 26.